

FORM TO BE USED BY A PRISONER IN FILING A COMPLAINT UNDER THE
CIVIL RIGHTS ACT, 42 U.S.C. § 1983, WITH JURISDICTION
UNDER 28 U.S.C. § 1343

U.S. DISTRICT COURT
DISTRICT OF MAINE
CLERK
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UNITED STATES DISTRICT COURT
DISTRICT OF MAINE

DEPUTY CLERK

dave bragg
[Enter above the full name of
the plaintiff in this action]

v.

Ion Shalit
DAVE Andrews
[Enter above the full name of
the defendant(s) in this action]

Docket no.

I. Previous Lawsuits

- A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes [] No [x]
- B. If your answer to "A" is yes, describe the lawsuit in the space below. [If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline]

1. Parties to this previous lawsuit

Plaintiff(s) _____
Defendant(s) _____

2. Court [If federal court, name the district; if state court, name the county]

3. Docket number _____

4. Name of judge whom case was assigned _____

5. Outcome [for example: It is still pending? Was it dismissed? Was it appealed] _____

6. Approximate date of filing lawsuit _____

7. Approximate date of outcome _____

II. Place of present confinement SCJ Scowhegan County Jail

A. Is there a prisoner grievance procedure in this institution?

Yes [☒] No [☐]

B. Did you present the facts relating to your complaint in the state prisoner grievance procedure? Yes [☒] No [☐]

C. If your answer is "Yes"

1. What steps did you take? I filed a Level 1 and a Level 2 grievance

2. What was the result? They told me to find my own priest and have them come in which is impossible

III. Parties

[In item "A" below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.]

A. Name of Plaintiff ~~David~~ Dave Bragg

Address 131 east Madison Rd Madison, ME 04950

[In item "B" below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use item "C" for the names, positions, and places of employment of any additional defendants.]

B. Name of Defendant Dave Andrews

Position LT Programs

Address 131 east Madison Rd Madison, ME 04950

C. Additional Defendant(s) Ion Shalit

Captian

131 East Madison Rd

Madison, ME 04950

IV. Statement of Claim

[State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheet if necessary.]

Capt Shalit answers our grievances and makes alot of the decisions in the Jail. Luitenant Andrews is program director and he is in charge of programs and getting religious services to us. These men are in charge of Religious Services which I've yet to receive since I've been here

V. Relief

[State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.]

I am asking for \$4,000.00 and I am asking for INJUNCTIVE Relief as for them to fix our religious programming so were not sitting in purgatory. The \$4000 I'm asking is about \$100 per service I've missed every Sunday since I've been here

Dam Baum
Signature of Plaintiff

Signed this 16 day of August, 2022

I declare under penalty of perjury that the foregoing is true and correct.

8.16.22

Date

Dam Baum
Signature of Plaintiff